1252661

SEC 1972 Potential persons who are to respond to the collection of information contained in this (6-02) form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response1

SEC USE ONLY				
Prefix		Serial		
DAT	E RECEI	VED		

Telephone Number

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that apply):

[] Rule 504 [] Rule 505 k] Rule 506 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA

03025595

Name of Issuer ([] check if this is an amendment and name has changed, and indiciate change.)

195 N. Harbor Drive, Suite 1109, Chicago, Illinois 60601 312-938-0911

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

(Number and Street, City, State, Zip Code)

Brief Description of Business

New City Bancorp, Inc.
Address of Executive Offices

(Including Area Code)

Bank Holding Company

Type of Business Organiza	ation
[X] corporation	[] limited partnership, already formed [] other (please specify):
[] business trust	[] limited partnership, to be formed
	Month Year
Actual or Estimated Date of	of Incorporation or Organization: [1] 2] [0] 2] [X] Actual [] Estimated
Jurisdiction of Incorporatio	on or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [I][L]

Page 2 of 10

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

Form D

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[x] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Baldermann, Al	bert C.		
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	de)
195 N. Harbor	Drive, Chicago, IL 6060	1	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		The state of the s
Bilanzic, Pete	r J.		
Business or Residence	ce Address (Number and Street,	City, State, Zip Coo	de)
17215 S. Doone	en Avenue, Tinley Park,	IL 60477	
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	·		
	e Address (Number and Street,	City, State, Zip Cod	de)
8206 S. Mobile	, Burbank, IL 60459		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Ehrenwerth, Me	rri-Lee		
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	de)
195 N. Harbor,	Chicago, IL 60601		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Fisher, Ronald	·		
	e Address (Number and Street,	City, State, Zip Coo	de)
	ina Court, Orland Park,	,	
	[] Promoter [] Beneficial	[] Executive	[] Director [] General and/or

Each general a	and managing partner of partner	ship issuers.	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Franch, Robert			
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	de)
1147 Shorewood	Court, Glendale Heights	s, IL 60139	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Hartz, Donald			
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	de)
24 Forest Gate	Circle, Oak Brook, IL 6	50523	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)	gide William (1994) and the State (1994) and the green and the State (1994) and the state (19	nagen kanada na 19 daga da saka sa manada galawa da kanada da 19 na manada da 19 na ganga manada manada ya man
Lazzara, Raymon	·		
	e Address (Number and Street,	City, State, Zip Coo	ie)
23 Forest Gate	Circle, Oak Brook, IL 6	50523	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Fuil Name (Last name	e first, if individual)		
Odelson, Burto	n S.		
Business or Residenc	e Address (Number and Street,	City, State, Zip Coo	de)
9709 S. Kilbou	rn Avenue, Oak Lawn, IL	60453	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Powell, Thomas	•		
	e Address (Number and Street,	City, State, Zip Coo	le)
	rn, Oak Lawn, IL 60453	•	
	[] Promoter [] Beneficial	[] Executive	[] Director [] General and/or

Each general a	and managing partner of partner	ship issuers.	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[x] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Wapinski, Gary	R.		
Business or Residence	e Address (Number and Street,	City, State, Zip Coo	de)
55 Oakwood, Pal	los Park, IL 60464		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Zausa, Jack E.			
Business or Residence	e Address (Number and Street,	City, State, Zip Coo	de)
15316 Wilshire	Drive, Orland Park, IL	60462	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Business or Residenc	e Address (Number and Street,	City, State, Zip Coo	de)
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)		
Business or Residenc	e Address (Number and Street,	City, State, Zip Coo	de)
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	first, if individual)		
Business or Residenc	e Address (Number and Street,	City, State, Zip Coo	de)
Check Box(es) that	[] Promoter [] Beneficial	[] Executive	[] Director [] General and/or

Apply		Owner Officer Managing Partner										
Full Na	ame (Las	st name	first, if in	ndividua	I)				and the second			
Busine	ess or Re	esidence	e Addres	ss (Num	ber and	Street, C	City, State	e, Zip Co	de)			
Check Apply	k Box(es)) that	[] Pro	moter [] Benefi Owne		[]Exe		[][Director [] Gener Mana Partne	
Full Na	ame (Las	st name	first, if in	ndividua	l)			**************************************				
Busine	ess or Re	esidence	e Addres	ss (Num	ber and	Street, C	City, State	e, Zip Co	de)			aan aan taaba dhaan dhaada dhaagaan aayaa ya gaa galay dha dha dhaada
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	Acceledation was a law and an off office			B	. INFOR	RMATIO	N ABOU	T OFFE	RING			
	s the issu	ıer sold	or does	s the iss	uer inter	nd to sell	, to non-	accredite	d investo	ors in this		es No
								_	der ULO			
2. Wh	at is the	minimur	n invest	ment tha	at will be	accepte	ed from a	ny indivi	dual?		_	25,000
3. Doe	es the of	fering pe	ermit joir	nt owner	ship of a	a single ι	ınit?				Ye [X	es No][]
directl conne persor the na	y or indirection with or ager or ager or of the	rectly, a h sales nt of a b e broke	ny comr of secui roker or r or dea	mission or rities in to dealer r ler. If mo	or simila he offeri egistere ore than	r remune ng. If a p ed with th five (5) p	eration for erson to e SEC a persons t	r solicita be listed nd/or wit o be liste	be paid tion of pu I is an as th a state ed are as that bro	rchasers sociated or states sociated	s in l s, list	
Full Na	ame (Las	t name	first, if ir	ndividua	l)							
	· ; · • · · · · · · · · · · · · · · · ·			NONE								
Busine	ess or Re	sidence	e Addres	ss (Numl	ber and	Street, C	ity, State	e, Zip Co	de)			
Name	of Assoc	ciated Bi	roker or	Dealer		en e						
 States	in Which	n Persor	n Listed	Has Sol	icited or	Intends	to Solicit	Purchas	sers			
(Che	ck "All	States'	or che	eck ind	ividual	States)			[] All S	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

Full Na	ame (Las	st name	first, if ir	ndividua	l)							
Busine	ess or Re	esidence	e Addres	s (Num	ber and	Street, C	ity, State	e, Zip Co	de)			The experience was a great was allowed a great control of the experience of the expe
Name	of Assoc	ciated B	roker or	Dealer								
						Intends States		Purchas	sers	[] All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
			first, if ir			Street, C	ity, State	e, Zip Co	de)			
Name	of Assoc	ciated B	roker or	Dealer			internation and the second section of the second		nozonovida (in dispensa y a grand			
						Intends States		Purchas	sers	[] All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	(Use bla	nk shee	et, or co	py and	use add	itional c	opies of	this she	et, as n	ecessar	y.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Offering Price	Sold
7,400,000	\$6,215,000
	\$
	c
	Φ
	\$ \$
	\$\$ \$\$
	•

Aggregate

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Dollar Amount of Purchases
Accredited Investors	41	\$6,120,000
Non-accredited Investors	3	\$ 95,000
Total (for filings under Rule 504 only)		\$

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part

Answer also in Appendix, Column 4, if filing under ULOE.

C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$ N/A
Regulation A		\$
Rule 504		\$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[X]\$_	5,000
Printing and Engraving Costs	[X] \$_	15,000
Legal Fees	[X]\$_	60,000
Accounting Fees	[X]\$_	50,000
Engineering Fees	[]\$_	
Sales Commissions (specify finders' fees separately)	[]\$_	
Other Expenses (identify) Miscellaneous	[X]\$_	5,000
Total	[X]\$_	135,000

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$6,080,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Purchase, rental or leasing and instal and equipment		[] \$\$ []
Construction or leasing of plant building	-	\$\$
Acquisition of other businesses (inclusive securities involved in this offering that exchange for the assets or securities pursuant to a merger)	at may be used in s of another issuer	[4] \$6,000,000\$
Repayment of indebtedness		[] \$\$
Working capital		[] [A] \$\$80,000
Other (specify):		[] \$\$
		[] []
Column Totals		
Total Payments Listed (column totals	added)	[X]\$ <u>6,080,000</u>
	D. FEDERAL SIGNATURE	
The issuer has duly caused this notice to b filed under Rule 505, the following signatur Securities and Exchange Commission, upon any non-accredited investor pursuant to particle.	ne signed by the undersigned or re constitutes an undertaking b on written request of its staff, the	y the issuer to furnish to the U.S.
filed under <u>Rule 505</u> , the following signatur Securities and Exchange Commission, upo	pe signed by the undersigned of constitutes an undertaking by the written request of its staff, the aragraph (b)(2) of Rule 502. Signature	by the issuer to furnish to the U.S. he information furnished by the issuer to be particularly to be particularly to be particularly
filed under Rule 505, the following signatur Securities and Exchange Commission, upon any non-accredited investor pursuant to parallel (Print or Type)	pe signed by the undersigned of constitutes an undertaking by the written request of its staff, the aragraph (b)(2) of Rule 502. Signature	y the issuer to furnish to the U.S. ne information furnished by the issuer to
filed under Rule 505, the following signatur Securities and Exchange Commission, upon any non-accredited investor pursuant to pa	pe signed by the undersigned of constitutes an undertaking by the written request of its staff, the aragraph (b)(2) of Rule 502. Signature	Date